Organization ID # 0718739 Commonwealth of Kentucky State of origin Filing fee \$130.00 Alison Lundergan Grimes, Secretary of Sta Received and Filed:

0718739 09

amcray PRPF

Alison Lundergan Grimes **Kentucky Secretary of State**

7/3/2013 8:33 AM Fee Receipt: \$130.00

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Reinstatement Application and **Reinstatement Annual Report** For the years 2012 through 2013

RST

Exact organization name and principal office address SCMM, INC. 2170 FORT HARRODS DR. APT #58 **LEXINGTON KY 40513**

The principal office address and registered agent name/office address cannot be changed on this form. When reinstating, you cannot modify the addresses until the reinstatement is filed. Once the reinstatement is filed, the statement of change can be filed online at app.sos.ky.gov/ftsearch or can be downloaded from our website.

Registered Agent and Registered Office Address

SHANE COCHRAN 2170 FORT HARRODS DR. APT #58 LEXINGTON, KY 40513



Principal Officers - List the name, address and title of all criment officers. All organizations must list at least one (1) officer, even in the case of a sole officer. If not specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records custodian SHANE COCHRAN Directors - List the name and address of all directors (if applicable). No listing of directors is verification that the corporation has dispensed with directors. If not specified, director addresses default to the principal office address The above entity was administratively dissolved on September 11, 2012 because the entity did not file its annual report for the year 2012. The undersigned states that the grounds for dissolution either did not exist of have been eliminated, and the entity's name satisfies the requirements of KRS 271B.14-210. Enclosed is a check in the amount of \$130.00, payable to Kentucky State Treasurer. Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to SCMM, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220. If not an office of aid entity, please provide a Declaration of Power of Attorney with the Reinstatement Application

itle (Required)



EDUCATION and WORKFORCE DEVELOPMENT CABINET OFFICE OF EMPLOYMENT AND TRAINING

Steven L. Beshear Governor

Tax Enforcement Branch 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone (502) 564-2272 Fax (502) 564-5442 www.oet.ky.gov Joseph U. Meyer Secretary

Buddy Hoskinson Executive Director

Date: 07/03/2013		
SCMM, INC.		
Dear Sir/Madam:		
	KRS 14A.7-030(1)(f) CERTI	FICATE

The Division of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 14A.7-030(1)(f).

Sincerely,

Beverly Dearborn Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone: (502) 564-2272

Kentucky Secretary of State organization number 0718739





THOMAS B. MILLER
Commissioner

FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

ELYSE WEIGELDeputy Commissioner

BOB BROOKS
Executive Director

July 2, 2013

SCMM, INC. 227 KOSTER ST LEXINGTON, KY. 40503

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **SCMM, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2011, and has paid the taxes shown to be due or assessed as of the date of this letter. The Department of Revenue requests the company's charter be reinstated provided all other requirements of the Secretary of State have been met by the corporation. This letter is valid for 30 days from the date of this letter.

Sincerely,

Brandi Armstrong, Auditor I Division of Corporation Tax 501 High Street, Mail Sta. 52 Frankfort, KY 40601 502-564-7268 FAX# 502-564-0058

Kentucky Secretary of State organization number 0718739

